



PART B - FEE(S) TRANSMITTAL

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04743 7590 01/18/2005

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CHICAGO, IL 60606

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Michael R. Hull (Depositor's name)
[Signature] (Signature)
April 18, 2005 (Date)

Table with 5 columns: APPLICATION NO., FILING DATE, FIRST NAMED INVENTOR, ATTORNEY DOCKET NO., CONFIRMATION NO. Values: 09/934,242, 08/21/2001, Colin P. Hart, 29985/01-009, 8158

TITLE OF INVENTION: PRESSURE TRANSDUCER PROTECTION VALVE

Table with 6 columns: APPLN. TYPE, SMALL ENTITY, ISSUE FEE, PUBLICATION FEE, TOTAL FEE(S) DUE, DATE DUE. Values: nonprovisional, NO, \$1400, \$300, \$1700, 04/18/2005

Table with 3 columns: EXAMINER, ART UNIT, CLASS-SUBCLASS. Values: FOX, JOHN C, 3753, 137-625500

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
[] Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 Marshall,
2 Gerstein &
3 Borun LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE: Scimed Life Systems, Inc
(B) RESIDENCE: (CITY and STATE OR COUNTRY) Maple Grove, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): [] Individual [X] Corporation or other private group entity [] Government

4a. The following fee(s) are enclosed:
[X] Issue Fee
[X] Publication Fee (No small entity discount permitted)
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4b. Payment of Fee(s):
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5. Change in Entity Status (from status indicated above)
[] a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
[] b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature: [Signature]
Typed or printed name: Michael R. Hull
Date: April 18, 2005
Registration No. 35,902

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